

Integrated Behavioral Health Information System (IBHIS) Denial and Adjustment Codes

TYPE	835 code	DENIAL REASONS:
CO	5	Place of Service Is Invalid For Procedure Code.
CO	15	Provider funding plan (P-Auth) is missing /invalid
CO	16	Procedure code or Date of Service invalid for this Authorization
OA	23	Claim Level Payment/Adjustment Information Found and No Service Level Payment/Adjustment Found
CO	29	Late Claim Denial
CO	45	Claim charge over contracted rate
CO	146	Diagnosis was invalid for the date(s) of service reported.
CO	147	Provider Inactive
CO	166	There is no Episode in place for this date of service
CO	181	Procedure code is not on Fee Table /Rendering Provider discipline is not covered for this procedure code
CO	197	Member Authorization invalid/exhausted
CO	222	Claimed over Provider funding plan (P-Auth) Maximum Contract Amount/No dollars remain for this authorization/ Remaining liability for this authorization cannot cover the total of the given service
CO	272	Client's Financial Eligibility does not include Medi-Cal guarantor on a Medi-Cal Funding Plan
CO	B7	Provider not registered on this date of service